

PTO/SB/01 (6-95)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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0010/PTO Rev. 6/95 U.S. Department of Commerce Patent and Trademark Office DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing	Attorney Docket Number	960296.97257
	First Named Inventor	Triplett
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	herewith
	Group Art Unit	
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BACTERIAL INOCULANTS FOR ENHANCING PLANT GROWTH

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

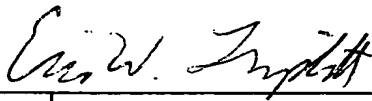
☐ Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

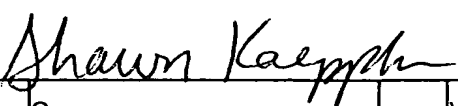
Application Number(s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional
60/251,137	12/04/00	

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. OBMAD1131101

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DECLARATION				Page 2	
<p>I hereby claim benefit under Title 35, United States Code §120 of any United States application(s), or §365(C) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT international application in the manner provided in the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.</p>					
U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YY)	Parent Patent Number (if applicable)		
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto					
<p>As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:</p>					
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Firm Name </div> <div> <input type="checkbox"/> Customer Number or label </div> </div> <p><input checked="" type="checkbox"/> List attorney(s) and/or agent(s) name and registration number below</p>					
Name		Registration Number	Name		Registration Number
Herbert W. Mylius		24,578	Bennett J. Berson		37,094
Barry E. Sammons		25,608	Michael A. Jaskolski		37,551
Charles W. Jirauch		26,186	Richard T. Roche		38,599
Nicholas J. Seay		27,386	Terri S. Flynn		41,756
George E. Haas		27,642	John T. Pienkos		42,997
Michael J. McGovern		28,326	Daniel G. Radler		43,028
Carl R. Schwartz		29,437	Gregory M. Smith		43,136
Keith M. Baxter		31,233	Steven J. Wietrzny		44,402
John D. Franzini		31,356	Paul D. Amrozowicz		45,264
Janine R. Novatt		32,593	David M. Kettner		45,598
Jean C. Baker		35,433	Adam J. Forman		46,707
David G. Ryser		36,407	Zhibin Ren		47,897
<input type="checkbox"/> Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto					
Please direct all correspondence to <input type="checkbox"/> Customer Number or label			OR <input checked="" type="checkbox"/> Fill in correspondence address below		
Name	David M. Kettner				
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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>					
Name of Sole or First Inventor:		A petition has been filed for this unsigned inventor			
Given Name	Eric	Middle Initial	W.	Family Name	Triplett
Inventor's Signature				Date	11/29/01
Residence: City	Middleton	State	WI	Country	US
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Post Office Address					
City	Middleton	State	WI	Zip	53562
Country	US	Applicant			
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto					

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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet																															
Name of Additional Joint Inventor, if any:															A petition has been filed for this unsigned inventor																										
Given Name		Shawn										Middle Initial		M.		Family Name		Kaepler										Suffix e.g. Jr.													
Inventor's Signature																	Date		11/29/01																						
Residence: City		Oregon										State		WI		Country		US										Citizenship		US											
Post Office Address		5290 County Highway A																																							
Post Office Address																																									
City		Oregon										State		WI		Zip		53575										Country		US										Applicant	
Name of Additional Joint Inventor, if any:															A petition has been filed for this unsigned inventor																										
Given Name		Marisa										Middle Initial		K.		Family Name		Chelius										Suffix e.g. Jr.													
Inventor's Signature		Given Name												Date																											
Residence: City		Greeley										State		CO		Country		US										Citizenship		US											
Post Office Address		1601 Sixth Street																																							
Post Office Address																																									
City		Greeley										State		CO		Zip		80631										Country		US										Applicant	
Name of Additional Joint Inventor, if any:															A petition has been filed for this unsigned inventor																										
Given Name												Middle Initial				Family Name												Suffix e.g. Jr.													
Inventor's Signature																	Date																								
Residence: City												State				Country												Citizenship													
Post Office Address																																									
Post Office Address																																									
City												State				Zip												Country												Applicant	
Name of Additional Joint Inventor, if any:															A petition has been filed for this unsigned inventor																										
Given Name												Middle Initial				Family Name												Suffix e.g. Jr.													
Inventor's Signature																	Date																								
Residence: City												State				Country												Citizenship													
Post Office Address																																									
Post Office Address																																									
City												State				Zip												Country												Applicant	
Additional inventors are being named on supplemental sheet(s) attached hereto																																									

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DECLARATION										ADDITIONAL INVENTOR(S)									
Name of Inventor, if any:										A petition has been filed for this unsigned inventor:									
SSN	Shawn					MR	DR	Kecppler			SSN								
Inventor's Signature											Date								
Residence: City	Oregon					State	WI	Country	US			Citizenship	US						
Post Office Address	5290 County Highway A																		
Post Office Address																			
City	Oregon					State	WI	Zip	53575			Country	US			Applicant			
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor:									
SSN	Marisa					MR	DR	Chelius			SSN								
Inventor's Signature	<i>Marisa Chelius</i>										Date	11/30/01							
Residence: City	Greeley					State	CO	Country	US			Citizenship	US						
Post Office Address	1007 31st Street																		
Post Office Address																			
City	Greeley					State	CO	Zip	80631			Country	US			Applicant			
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor:									
SSN						MR	DR				SSN								
Inventor's Signature											Date								
Residence: City						State		Country				Citizenship							
Post Office Address																			
Post Office Address																			
City						State		Zip				Country				Applicant			
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor:									
SSN						MR	DR				SSN								
Inventor's Signature											Date								
Residence: City						State		Country				Citizenship							
Post Office Address																			
Post Office Address																			
City						State		Zip				Country				Applicant			
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor:									
Additional inventors are being named on supplemental sheet(s) attached herein																			

** TOTAL PAGE 04 **